

JANUARY 9, 2008 MICHAEL W. DOBBINS

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CLERK, U.S. DISTRICT COURT

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UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

MICHAEL W. DOBBINS CLERK, U.S. DISTRICT COURT

DEC 1 0 2007 07cv6934 (Enter above the full name JUDGE NORGLE of the plaintiff or plaintiffs in MAG. JUDGE SCHENKIER this action) VS. Case No: (To be supplied by the Clerk of this Court) (Enter above the full name of ALL defendants in this action. Do not use "et al.") CHECK ONE ONLY: COMPLAINT UNDER THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983 U.S. Code (state, county, or municipal defendants) COMPLAINT UNDER THE CONSTITUTION ("BIVENS" ACTION), TITLE 28 SECTION 1331 U.S. Code (federal defendants) **OTHER** (cite statute, if known)

BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.

I.	Plaint	iff(s):
	Λ.	Name: Mori Taylor
	B.	Date of Birth: December 22, 1984 (12.22.84)
	C	List all aliases:
	D.	Prisoner identification number: <u>L115254</u>
	E.	Place of present confinement: Lake County dail
	F.	Address: P.O. Box 38, Nbukegan, Illinois, 60079
	aliases	re is more than one plaintiff, then each plaintiff must list his or her name, date of birth, , I.D. number, place of confinement, and current address according to the above format eparate sheet of paper.)
II.	(In A b	dant(s): below, place the full name of the first defendant in the first blank, his or her official in in the second blank, and his or her place of employment in the third blank. Space be additional defendants is provided in B and C.)
	A.	Defendant: Patrich Firman
		Title: Deputy of Corrections
		Place of Employment: Lake County Sheriff Correctional Division
	B.	Defendant: David Kiek
		Title: Clasification Supervisor
		Place of Employment: Lake Camby Sheriff Ldult Correctional Division
	C	Defendant: Lake County Sheriff Adult Correctional Division
		Title: Robert H. Babcox Center
		Place of Employment: Lake County Jul
		have more than three defendants, then all additional defendants must be listed ing to the above format on a separate sheet of paper.)

I.

III.		ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal at in the United States:
	A.	Name of case and docket number: Kari Tulon Taylor (18.) Officer Nater loo. (Case # 070 6644)
	B.	Approximate date of filing lawsuit: November 17th, 2007 (11-17-07
	C.	List all plaintiffs (if you had co-plaintiffs), including any aliases:
	Ď.	List all defendants: Africer Naterloo (6226), Officer Johnson (1994), Lake County Jail, Screent Navarro, Lieutenant D. Wathen, and Jehniter Witherspran.
	E.	Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): United States District Northern District of Illinois Eastern Division, (Cook County).
	F.	Name of judge to whom case was assigned: (Judge Morgle / Magistrate): Judge Schenbier)
	G.	Basic claim made: failure to provide safe, and humane treatment to Inmate, and Cruel and Unusual Punishment.
	H.	Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?): These claims are still pending.

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

Approximate date of disposition: November 26,2007 (11.26.07)

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

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The Right to safe and humane treatment
given with respect importiality and fairness, and
also violates my right to be informed of the rules
also violates my right to be informed of the rules and procedures that directly effect me within
the facility.
the tacility. (End of Complaint)
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V. Relief:

VI.

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

I want to be awarded with 1,000.00 (dollars) for each day spent in the Segragation Unit due to violations of my rights. I want to be awarded with 1,000,000 (dollars) for Cruel and Unusual Ponishment, Pain and Suffering, Muntal Anguish, Depression and Stress. Also 1,000,000 (dollars) in Pontive Damages, Lawyer and court Fees.

The plaintiff demands that the case be tried by a jury.

CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this 30 th day of lavember, 2007

(Signature of plaintiff or plaintiffs)

hori
(Print name)

L15254
(I.D. Number)

P.O.Dox 38

Waukear Jino's 60079
(Address)